

Liquor Control Board Licensing and Regulation PO Box 43098 Olympia WA 98504-3098 Phone: (360) 664-1600 Fax: (360) 753-2710

Tied House Statement – Retail Affidavit of No Monetary Contribution to Business

Trade Name_____ License No._____

I am affiliated with the above business mak have made no monetary contribution towar	
 I understand under the provisions of RCW interest, directly or indirectly, in any manufa alcoholic beverages. This includes owners organizational structure of all breweries, with manufacturers. 	acturer, importer or distributor of hip in any company within the
 I understand the restriction of RCW 66.28.0 party of interest in a retailer of alcoholic bever 	
By signing this form I acknowledge my understand this statement is cause for denial of a license or recurrently held.	
Print Name	_
Signature of partner, officer, stockholder, LLC member or manager	Date